

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE  
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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590

04/11/2006

Maureen Stretch  
26 Charles Street  
Natick, MA 01760

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Certificate of Mailing or Transmission  
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

MAUREEN STRETCH (Depositor's name)  
Maureen Stretch (Signature)  
5/30/06 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/702,050	10/30/2000	William J. Flanagan	BT00-003CIP	8548

TITLE OF INVENTION: SYSTEM AND METHOD FOR CONTRACT AUTHORITY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$30	\$0	\$30	07/11/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
MEINECKE DIAZ, SUSANNA M	3623	705-080000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. MAUREEN STRETCH

2.

3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNOR

SKY TECHNOLOGIES LLC

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

BOSTON, MA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☐ Publication Fee (No small entity discount permitted)  
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- ☐ A check in the amount of the fee(s) is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 5016936 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Maureen Stretch

Date

5/30/06

Typed or printed name

MAUREEN STRETCH

Registration No.

29,447

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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**FAX COVER SHEET****MAUREEN STRETCH****Attorney at Law**26 Charles Street  
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Phone:

Fax: 508-651-9932

<b>Send to:</b>	<b>Commissioner for Patents</b>
<b>Attention:</b>	<b>Mail Stop Issue FEE</b>
<b>Office location:</b>	<b>P.O.Box 1450, Alexandria VA 22313-1450</b>
<b>Fax number:</b>	<b>571-273-2885</b>
<b>From:</b>	<b>Maureen Stretch</b>
<b>Client/Matter</b>	<b>Application Serial. NO. 09/702,050</b>
<b>Date:</b>	<b>5/30/06</b>

TOTAL PAGES, INCLUDING COVER: 2

**Contents**

Issue Fee Transmittal and Authorization to charge deposit account

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